LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

Division of Environmental Health
2200 St. Marys Ave Lincoln, NE 68502 (402) 471-8000

NON TRANSFERABLE

PERMIT

SEWAGE INSTALLATION

No. 91380070701

Issued 05/29/91
Expires 11/29/91

ESTABLISHMENT

RANDY KELLY
T8N R6E SEC 16
LOT 42

FEES: Permit 018754 $150.00

Total $150.00

PERMITTEE

RANDY KELLY
1848 SW 12 ST
LINCOLN NE 68522

Issued By COUNTY HEALTH

VALID RECEIPT ONLY IF RECEIPTED IN THIS SPACE	
DATE	AMOUNT
5/30/91	PAID

THIS LICENSE OR PERMIT IS ISSUED SUBJECT TO REVOCATION AS PROVIDED BY LAW

FORM 20103-0477
REQUEST FOR SITE CLEARANCE AND PERMIT
FOR INDIVIDUAL SEWAGE DISPOSAL SYSTEM
City Ordinance No. 9150 ☐
County Resolution No. 2832 ☒

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502
Phone: 471-7800

A

FILING FEE: $150.00 X

FILE NO. _____

DATE: _____

The undersigned hereby requests SITE CLEARANCE and PERMIT to construct an Individual Sewage Disposal System in conformance with appropriate resolution or ordinance, as described herein:

1. Legal description of property: Twp. 8 N ; Range 6 E ; Section 16 ;
   Block _____ : Lot 42 I.T. : Addition _____
   Street Address _____

2. Property Use: Residential ☒ ; Commercial ☐ Other Use ☐
   No. of Bedrooms 2. Describe HOME USE

3. Type of Individual Sewage Disposal System: Septic Tank ☒ ; Other ☐

4. Distance to public sewer: UNKNOWN ft. WILL INSTALL WHATEVER PERC TEST INDICATES

438-2757 Randy K. Kelly by WG Sutherland
Signature of Applicant (Owner or Lessee)

1849 SW 12th Lincoln, Ne 68522
Address

(Do not write below this double line)

1. Health Department: Date Rec'd. 5/16/91. Date Frwd. 5/17/91. ACTION: Approved ☒ Disapproved ☐ Signature: Jerold C. Hoop

2. Supt. Bldg. Insp.: or Village Clerk: Date Rec'd. 5.17.91. Date Frwd. 5.17.91. ACTION: Approved ☒ Disapproved ☐ Signature: Paul Bauma

3. City or County Engineer: Date Rec'd. 05/17/91. Date Frwd. _____. ACTION: Approved ☒ Disapproved ☐ Signature: Thomas K Williams

REMARKS OR REASONS FOR DISAPPROVAL _____

Site Visits:
Date: 9-6-91 by: PAUL DROZDOWSKI
Date: _____ by: _____
Date: _____ by: _____

White: Health Dept. Copy
Yellow: Engineers Copy
Pink: Bldg. Inspector's Copy

INSTALLATION FINAL WRITTEN APPROVAL
Date: _____ By: _____

FORM 23-43

FORM 20105-0477
SOIL ABSORPTION TEST DATA REPORT
(Annex to Application)
(Reference: City Ordinance No. 9150 and County Resolution No. 2832)

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
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B

FILE NO. _____

PROPERTY WHERE SOIL TESTED:

Location: Township 8N ; Range 6E ; Section & ¼ Section 16. Lot 42
Property Dimensions: _____ ft. x _____ ft. Area: 3.7 acres. (Attach Sheet C with sketch of property).
Soil Type: Silty Clay ☐ ; Silty Clay Loam ☐ ; Sandy Loam ☐ ; Silt Loam ☐ ; Clay Loam ☐
Dates of Tests: 4-18-91 to 4-19-91. Weather: Precip. COLD DAMP OVERCAST Temp. 52

OWNER: RANDY K & LINDA J. KELLY

Address: 1848 SW 12TH ST. LINCOLN, NE 68522

PERCOLATION TEST DATA TABLE

a.	b.	c.	d.	e.	f.	g.	h.	i.	j.	k.	l.	m.	n.
		Pre-Saturation Period				Percolation Readings						Results	
		Start		End		Start			End				
Hold No.	Hole Depth (in.)	Date (Mo./Day)	Time (Hr./Min.)	Date (Mo./Day)	Time (Hr./Min.)	Date (Mo./Day)	Time (Hr./Min.)	Water Level (in.)	Time (Hr./Day)	Water Level (in.)	Elapsed Time (Min.)	Water Level Drop (in.)	Percolation Rates (Min./in.)
1	36	4/18/91	1:10P	4/19/91	5:15P	4-19-91	10:15A	21 5/8	2:45P	22 1/8	30	1/2	
2	36	"	"	"	"	"	"	22	"	22 1/2	30	1/2	
3	36	"	"	"	"	"	"	19 3/4	"	20 1/8	30	3/8	
4	36	"	"	"	"	"	"	21 1/8	"	21 5/8	30	1/2	
5	36	"	"	"	"	"	"	22	"	22 1/8	30	1/8	
6	36	"	"	"	"	"	"	17 7/8	"	18	30	1/8	

Sum of Percolation Rates: _____
Average of Rates: _____
Mean of Rates: _____

Signature of Person Conducting Test

Address 4300 LENOX AVE 68510 Phone 488-3128

2BR House (Do not write below this line)

REVIEWING ACTION

Remarks: _____
Soil Type (SCS): _____
Date: _____

Approved Percolation Rate (a)
A. _____ min./inch
B. _____ min./inch
C. _____ min./inch

Signature of Reviewing Official